

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	PS		11/17
O.I.P.E. CLASSIFIER		25	11-19-98
FORMALITY REVIEW	W	21173	12-30-98

**INDEX OF CLAIMS**

- ✓ ..... Rejected
- || ..... Allowed
- (Through numeral) ... Canceled
- + ..... Restricted
- N ..... Non-elected
- I ..... Interference
- A ..... Appeal
- O ..... Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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